



# MONO COUNTY DEPARTMENT OF PUBLIC WORKS

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Evan Nikirk, PE  
Director

Kelly Garcia, PE  
Assistant Director

## SOLID WASTE ACCOUNT APPLICATION

I hereby apply for a solid waste account against which gate fees I incur at Mono County disposal sites may be charged:

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City State Zip

Physical Address: \_\_\_\_\_  
City State Zip

If applying as a business or public agency, please also complete the following:

Business/Agency: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

I want to restrict the account and authorize charges applied only by the following person(s):

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_  
(4) \_\_\_\_\_ (5) \_\_\_\_\_ (6) \_\_\_\_\_  
(7) \_\_\_\_\_ (8) \_\_\_\_\_ (9) \_\_\_\_\_

I will most likely use the following disposal site(s): *(please check those that apply)*

☐ Benton ☐ Bridgeport ☐ Paradise ☐ Walker  
☐ Benton Crossing ☐ Chalfant ☐ Pumice Valley

I understand that this account is solely for my convenience and that I will be invoiced following each month that charges are incurred. I assume responsibility for any amounts owing on the account. If I've established the account for a business or public agency, I acknowledge that I am authorized to incur debt and enter into contracts on its behalf. I agree to abide by policies governing account usage adopted by the County and understand that non-payment of charges may result in penalties and/or account suspension or cancellation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please sign and complete the upper portion of this form in full and submit it to Public Works.  
A copy of the completed form will be returned to you upon account approval.

----- Space below reserved for Public Works use only -----

SW Acct. No.: \_\_\_\_\_ Approved by: \_\_\_\_\_ Date: \_\_\_\_\_